

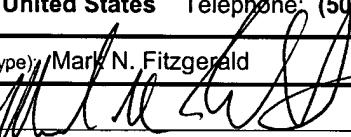
**UTILITY
PATENT APPLICATION
TRANSMITTAL**

Attorney Docket No.: S-99,917

First Inventor or Application Identifier: John Galbraith

Title: VISION-BASED OBSTACLE AVOIDANCE

Express Mail Label No.: ER311841353US

APPLICATION ELEMENTS		ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	
1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g. PTO/SB/17) <i>(submit an original and a duplicate for fee processing)</i>		6. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	
2. <input checked="" type="checkbox"/> Applicant claims small entity status. <i>See 37 CFR 1.27.</i>		7. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> <ol style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Copy b. Specification Sequence Listing on: <ol style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statement verifying identity of above copies 	
ACCOMPANYING APPLICATION PARTS			
8. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & documentation)			
9. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee)			
10. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations			
11. <input type="checkbox"/> Preliminary Amendment			
12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(should be specifically itemized)</i>			
13. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i>			
14. <input type="checkbox"/> Nonpublication Request and Certification Under 35 U.S.C. 122(b)(2)(b)(i)			
15. <input checked="" type="checkbox"/> Other: Compact Discs (2)			
16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application S.N. _____ / _____.			
Prior application information: Examiner:		Group/Art Unit:	
<small>For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.</small>			
16. CORRESPONDENCE ADDRESS			
<input checked="" type="checkbox"/> Customer Number		OR <input type="checkbox"/> Correspondence Address Below	
35068			
Name: Mark N. Fitzgerald Address: Los Alamos National Laboratory LC/IP, MS A187 City: Los Alamos State: New Mexico Zip Code 87545 Country: United States Telephone: (505) 665-5187 Fax: (505) 665-4424			
Name (Print/Type): Mark N. Fitzgerald		Registration No. (Attorney/Agent): 48,300	
Signature: 		Date: 10/17/2003	

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10/17/03

FEE TRANSMITTAL For FY 2004

*Patent fees are subject to annual revision
(submit an original and a duplicate for fee processing)*

Complete if Known	
Application Number:	
Filing Date:	
First Named Inventor:	John Galbraith
Examiner Name:	
Group/Art Unit:	
Attorney Docket No.:	S-99,917

METHOD OF PAYMENT

- The commissioner is hereby authorized to charge indicated fees and credit any over payments to:
 Deposit Account Number: 12-2150
 Deposit Account Name: Los Alamos National Laboratory
 Charge Any Additional Fee Required Under 37 C.F.R. 1.16 and 1.17
 Applicant claims small entity status.
 See 37 CFR 1.27

FEE CALCULATION (continued)**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Fee	Small Entity Fee	Fee Description	Fee Paid
\$770	\$385	Utility filing fee	385
\$770	\$385	Reissue filing fee	
\$160	\$80	Provisional filing fee	
SUBTOTAL (1)		\$385	

2. EXTRA CLAIM FEES

Extra Claims	Fee from Fee Paid Below
Total Claims 4 -20** =	0 X 0 = 0
Independent 2 -3 ** =	0 X 0 = 0
Claims Multiple Dependent	=

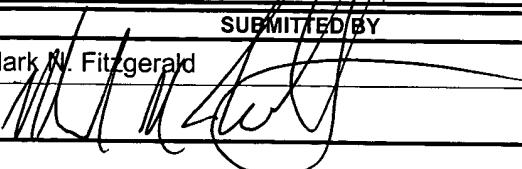
** or number previously paid, if greater; For Reissues, see below

Large Entity Fee	Small Entity Fee	Fee Description
\$18	\$9	Claims in excess of 20
\$86	\$43	Independent claims in excess of 3
\$290	\$145	Multiple dependent claim, if not paid.
\$86	\$43	** Reissue independent claims over original patent
\$18	\$9	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)		\$0

3. ADDITIONAL FEES

Large Entity Fee	Small Entity Fee	Fee Description	Fee Paid
\$130	\$65	Surcharge – late filing fee or oath	
\$50	\$25	Surcharge – late provisional filing fee or cover sheet	
\$2,520	\$2,520	For filing a request for reexamination	
\$110	\$55	Extension for reply within first month	
\$420	\$210	Extension for reply within second month	
\$950	\$475	Extension for reply within third month	
\$1,480	\$740	Extension for reply within fourth month	
\$2,010	\$1,005	Extension for reply within fifth month	
\$330	\$165	Notice of Appeal	
\$330	\$165	Filing a brief in support of an appeal	
\$290	\$145	Request for oral hearing	
\$110	\$55	Petition to revive – unavoidable	
\$110	\$55	Terminal Disclaimer	
\$1,330	\$665	Petition to revive – unintentional	
\$130	\$130	Petitions to the Commissioner	
\$ 50	\$50	Petitions related to provisional applications	
\$ 180	\$180	Submission of Information Disclosure Statement	
\$770	\$385	Filing a submission after final rejection (37 CFR 1.129 (a))	
\$770	\$385	For each additional invention to be examined (37 CFR 1.129(b))	
\$100	\$100	Certificate of Correction	
\$300	\$300	Publication fee for early, voluntary, or normal publication	
\$770	\$385	Request for Continued Examination (RCE)	
Other fee (specify) _____			
SUBTOTAL (3)		\$0	
Reduced by Basic Filing Fee Paid			
SUBTOTAL FROM 1		\$385	
SUBTOTAL FROM 2		\$0	
SUBTOTAL FROM 3		\$0	
TOTAL AMOUNT OF PAYMENT		\$385	

SUBMITTED BY

SUBMITTED BY		Complete (if applicable)	
Printed Name:	Mark N. Fitzgerald	Reg. No.	48,300
Signature:		Date:	10/17/03
Telephone	(505)665-5187		